



Journal Advertising Order Form

Advertiser Information (please print):

Name (please print): _____
 Company/Institution: _____

 Address Line 1: _____
 Address Line 2: _____
 City State/Province: _____
 Zip/Postal Code: _____
 Country: _____
 Tel./Fax: _____ / _____
 Email: _____

Agency Information (please print):

Name (please print): _____
 Company/Institution: _____

 Address Line 1: _____
 Address Line 2: _____
 City State/Province: _____
 Zip/Postal Code: _____
 Country: _____
 Tel./Fax: _____ / _____
 Email: _____

We wish to place the following advertisement in _____ (journal name):

Price: _____ Color B/W
 Ad Size: Full page 1/2 page horizontal 1/2 page vertical Ad/File Name: _____
 Insert Size: Full page 1/2 page Other (please specify): _____
 Banner Ad Size: 120 pixels x 600 pixels 120 pixels x 60 pixels
 Instructions/Comments: _____

Insertion Frequency:

of insertions: _____ to begin (Vol/Issue): _____ to end (Vol/Issue): _____
 or Single Insertion Only (Vol/Issue): _____
 Banner ad: per quarter per year

Payment Information:

Method of Payment:
 check: _____
 P.O. Number: _____
 Credit Card: Visa MasterCard American Express
 Card Number: _____
 Exp. Date: _____
 Invoice should be sent to: Advertiser Agency
 Authorized by: _____

Payment terms: Full payment is due within 30 days from the date of the invoice.

Deadlines (in month prior to issue date):
 Insertion Order: 5th day; Materials: 10th day

Send Insertion order form to:
 Kim Mitchell, Landes Bioscience
 1002 West Avenue; 2nd Floor | Austin, Texas 78701 USA
 Tel.: 512.637.6050 | Fax: 512.637.6079
 Email: kmitchell@landesbioscience.com

Email files or questions about files to:
 Kathryn Saucedo, Landes Bioscience
 Email: kat@landesbioscience.com
 Preferred file types: high-resolution PDF, EPS, or PSD

Signature: _____ Date: _____